

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

PAC For a Change

ADDRESS (number and street)

777 S. Figueroa Street, Ste. 4050

☐Check if different
than previously
reported. (ACC)

Los Angeles

CA

90017

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00342048

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Sim Farar

Signature of Treasurer

Electronically Filed by Sim Farar

Date

10

20

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
PAC For a Change

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	9	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		344974.26
(b) Cash on Hand at Beginning of Reporting Period	380394.92	
(c) Total Receipts (from Line 19)	68373.78	396746.54
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	448768.70	741720.80
7. Total Disbursements (from Line 31)	43712.98	336665.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	405055.72	405055.62
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PAC For a Change

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	9	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	38036.68	239136.68
(i) Itemized (use Schedule A)	23761.85	78292.75
(ii) Unitemized	61798.53	317429.43
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	1000.00	51250.00
(c) Other Political Committees (such as PACs)	62798.53	368679.43
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➤		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	5000.00	19255.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	575.25	8811.51
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	68373.78	396746.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	68373.78	396746.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	29712.98	220165.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	29712.98	220165.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	116000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	43712.98	336665.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43712.98	336665.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	62798.53	368679.43
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62798.53	368679.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	29712.98	220165.18
37. Offsets to Operating Expenditures (from Line 15, page 3)	5000.00	19255.60
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24712.98	200909.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Elizabeth J. Cabraser

Mailing Address 275 Battery St., 30th Floor

City State Zip Code
 San Francisco CA 94111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lieff, Cabraser, Heimann &
Bernstein

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 0 5 / 2 0 0 8

Transaction ID: C32426

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Susan Castagne

Mailing Address 26 rue de Chartres

City State Zip Code
 Neuilly-sur-Seine 92200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 2 / 2 0 0 8

Transaction ID: C31998

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

David Ellis

Mailing Address 1927 Antonio Ave.

City State Zip Code
 Clovis CA 93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.01

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 2 / 2 0 0 8

Transaction ID: C32001

Amount of Each Receipt this Period

200.01

SUBTOTAL of Receipts This Page (optional)

5300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Robert F Harris

Mailing Address 68 Yale Road

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Psychiatrist

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 0 8

Transaction ID: C31655

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Megan Hull

Mailing Address 2226 Hall Pl. N.W.

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 3 / 2 0 0 8

Transaction ID: C32257

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Megan Hull

Mailing Address 2226 Hall Pl. N.W.

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 8

Transaction ID: C32415

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 47

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Robert Trent Jones

Mailing Address 705 Forest Ave.

City State Zip Code
Palo Alto CA 94301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Robert Trent Jones II LLC

Occupation
Golf Course Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C32423

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Alan Kaye

Mailing Address 23512 Collins St.

City State Zip Code
Woodland Hills CA 91367

FEC ID number of contributing
federal political committee.

C

Name of Employer
PathNet Esoteric Laborato-
ry Instit

Occupation
Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 0 8

Transaction ID: C31734

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Samuel Keesal

Mailing Address 400 Oceangate 14th Floor

City State Zip Code
Long Beach CA 90802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Keesal, Young, & Olson

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 7 / 2 0 0 8

Transaction ID: C32429

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 47

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
PAC For a Change**A.**

Full Name (Last, First, Middle Initial)

Paul A. Kotta

Mailing Address PO Box 1896

City

Soquel

State

CA

Zip Code

95073

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	8

Transaction ID: C31465

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Tracy L. Austin

Mailing Address 1 West 121st Street

City

New York

State

NY

Zip Code

10027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mitsubishi International
Corp.Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	8

Transaction ID: C31437

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Philip Lindquist

Mailing Address 437 S Orange Grove Bl., #4

City

Pasadena

State

CA

Zip Code

91105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Calif Inst. of Tech.Occupation
Engineer/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

Transaction ID: C31617

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Karen Loewenstern

Mailing Address P.O. Box 1499

City State Zip Code
Avon CO 81620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.67

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 0 8

Transaction ID: C31914

Amount of Each Receipt this Period

166.67

B.

Full Name (Last, First, Middle Initial)
Karen Loewenstern

Mailing Address P.O. Box 1499

City State Zip Code
Avon CO 81620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.67

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 8

Transaction ID: C32307

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Linda Marshik

Mailing Address 415 East 18th Street

City State Zip Code
New York NY 10665

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 8

Transaction ID: C32316

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

766.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Richard McGonigal

Mailing Address 5 Swale Road

City

Norwalk

State

CT

Zip Code

06855

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: C31993

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Donna Moog

Mailing Address 7850 E. San Carlos Rd.

City

Scottsdale

State

AZ

Zip Code

85258

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 6 / 2 0 0 8

Transaction ID: C31530

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

F. Felix Ortiz

Mailing Address 7700 East First Place

City

Denver

State

CO

Zip Code

80209

FEC ID number of contributing
federal political committee.

C

Name of Employer
City of Denver

Occupation
Community Relations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 1 / 2 0 0 8

Transaction ID: C31589

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Edmund Payne

Mailing Address 244 Corte Madera Ave.

City

Mill Valley

State

CA

Zip Code

94941-9494

FEC ID number of contributing
federal political committee.

C

Name of Employer
Albathion

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 8

Transaction ID: C31449

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Edmund Payne

Mailing Address 244 Corte Madera Ave.

City

Mill Valley

State

CA

Zip Code

94941-9494

FEC ID number of contributing
federal political committee.

C

Name of Employer
Albathion

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 0 / 2 0 0 8

Transaction ID: C31923

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Edmund Payne

Mailing Address 244 Corte Madera Ave.

City

Mill Valley

State

CA

Zip Code

94941-9494

FEC ID number of contributing
federal political committee.

C

Name of Employer
Albathion

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 8 / 2 0 0 8

Transaction ID: C31680

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Edmund Payne

Mailing Address 244 Corte Madera Ave.

City

Mill Valley

State

CA

Zip Code

94941-9494

FEC ID number of contributing
federal political committee.

C

Name of Employer
Albathion

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 0 8

Transaction ID: C32296

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Grant Perkins

Mailing Address P.O Box 60

City

Captain Cook

State

HI

Zip Code

96704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 7 / 2 0 0 8

Transaction ID: C31474

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Robert Rader

Mailing Address 38 3rd St, Apt. 304

City

Los Altos

State

CA

Zip Code

94022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 2 / 2 0 0 8

Transaction ID: C31436

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

770.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Robert Rader

Mailing Address 38 3rd St, Apt. 304

City

Los Altos

State

CA

Zip Code

94022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Transaction ID: C31615

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Jonathan Rosen

Mailing Address 354 Longfellow Avenue

City

Hermosa Beach

State

CA

Zip Code

90254

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCI

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 8 / 2 0 0 8

Transaction ID: C31571

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Martin Rosenblatt

Mailing Address 160 West 97th Street, #11B

City

New York

State

NY

Zip Code

10025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 6 / 2 0 0 8

Transaction ID: C31524

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Monica Rosenthal

Mailing Address 121 Fremont Pl.

City

Los Angeles

State

CA

Zip Code

90005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miss Peach Productions

Occupation
Actress

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Transaction ID: C32427

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Philip Rosenthal

Mailing Address 121 Fremont Pl.

City

Los Angeles

State

CA

Zip Code

90005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Where's Lunch?

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 0 8

Transaction ID: C32428

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Lorraine Sheinberg

Mailing Address 8840 Wilshire Blvd.

City

Beverly Hills

State

CA

Zip Code

90211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Actor/Activist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C32424

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Sidney Sheinberg

Mailing Address P.O. Box 8180

City

Northridge

State

CA

Zip Code

91327

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Bubble Factory

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: C32425

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Joe Showalter

Mailing Address 2398 S. Lima Cir.

City

Aurora

State

CO

Zip Code

80014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 1 / 2 0 0 8

Transaction ID: C31942

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Linda Wagner

Mailing Address 7 Northgate Rd.

City

Colorado Springs

State

CO

Zip Code

80906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Med Study Corp.

Occupation
Medical Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 6 / 2 0 0 8

Transaction ID: C31526

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

38036.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 47

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

AFSCME - PEOPLE PAC

Mailing Address 1625 L Street, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00011114

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: C31896

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 47

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Hillary Clinton for President Exploratory Committee

Mailing Address 1717 K Street N.W. Suite 1001

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00431569

Name of Employer

Occupation

Receipt For:

☐ ☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 8

Transaction ID: C31608

Amount of Each Receipt this Period

5000.00

Refund

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 47

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

PAC For a Change

A.

Full Name (Last, First, Middle Initial)

California Bank & Trust

Mailing Address 550 S. Hope Street, #100

City

Los Angeles

State

CA

Zip Code

90071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C32757

Amount of Each Receipt this Period

66.07

Interest

B.

Full Name (Last, First, Middle Initial)

Merrill Lynch

Mailing Address 1325 Franklin Avenue

City

Garden City

State

NY

Zip Code

11530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8503.91

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C32756

Amount of Each Receipt this Period

509.18

Interest

SUBTOTAL of Receipts This Page (optional)

575.25

TOTAL This Period (last page this line number only)

575.25

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2947

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.65

B.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2949

Date of Disbursement

/ /

Amount of Each Disbursement this Period

121.42

C.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2948

Date of Disbursement

/ /

Amount of Each Disbursement this Period

243.74

SUBTOTAL of Disbursements This Page (optional)

370.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 360002	Transaction ID: D2844 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 4 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 33336 Purpose of Disbursement PAC Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>17.60</div>
B. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 360002 City Chicago State IL Zip Code 33336 Purpose of Disbursement PAC Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2842 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 8 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>0.80</div>
C. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 360002 City Chicago State IL Zip Code 33336 Purpose of Disbursement PAC Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2843 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>35.68</div>

SUBTOTAL of Disbursements This Page (optional)

54.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 360002

City Chicago State IL Zip Code 33336

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2841

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.50

B.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 360002

City Chicago State IL Zip Code 33336

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2839

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.80

C.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 360002

City Chicago State IL Zip Code 33336

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2840

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2.40

SUBTOTAL of Disbursements This Page (optional)

11.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P.O. Box 360002

City State Zip Code
Chicago IL 33336

Purpose of Disbursement

PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2845

Date of Disbursement

/ /

Amount of Each Disbursement this Period

0.80

B.

Full Name (Last, First, Middle Initial)

Articulated Man, Inc.

Mailing Address 1508 W. Sunnyside Avenue

City State Zip Code
Chicago IL 60640

Purpose of Disbursement

PAC Website Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2847

Date of Disbursement

/ /

Amount of Each Disbursement this Period

115.00

C.

Full Name (Last, First, Middle Initial)

Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement

PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2858

Date of Disbursement

/ /

Amount of Each Disbursement this Period

26.68

SUBTOTAL of Disbursements This Page (optional)

142.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2860

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2859

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2857

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

99.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2867

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2856

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2864

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

75.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2863

Date of Disbursement

/ /

Amount of Each Disbursement this Period

58.95

B.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2865

Date of Disbursement

/ /

Amount of Each Disbursement this Period

28.30

C.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2861

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11.07

SUBTOTAL of Disbursements This Page (optional)

98.32

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change**A.**Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2862

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	8

Amount of Each Disbursement this Period

7.58

B.Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2850

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	8

Amount of Each Disbursement this Period

6.87

C.Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2849

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	8

Amount of Each Disbursement this Period

27.38

SUBTOTAL of Disbursements This Page (optional)

41.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2852

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.24

B.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2853

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2.33

C.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2855

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2.34

SUBTOTAL of Disbursements This Page (optional)

9.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2854

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2851

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2868

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

4.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2866

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Bankcard USA

Mailing Address 5701 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
PAC Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2848

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Blackrock Associates, LLC

Mailing Address 1072 Jackson Street

City State Zip Code
San Francisco CA 94133

Purpose of Disbursement
PAC Website Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2869

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

3279.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Blazer Communications	Transaction ID: D2870 Date of Disbursement
Mailing Address 16501 Ventura Blvd., Suite 5-4	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
<div> <div>City Encino State CA Zip Code 91346</div> <div> <div>Purpose of Disbursement PAC Print Advertisement</div> <div>Candidate Name</div> </div> <div> <div>Category/Type</div> </div> </div>	Amount of Each Disbursement this Period <div>250.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div>	
B. Full Name (Last, First, Middle Initial) California Pacific	Transaction ID: D2882 Date of Disbursement
Mailing Address 210 East Bonita Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
<div> <div>City San Dimas State CA Zip Code 91773</div> <div> <div>Purpose of Disbursement Transportation</div> <div>Candidate Name</div> </div> <div> <div>Category/Type</div> </div> </div>	Amount of Each Disbursement this Period <div>119.35</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div>	
C. Full Name (Last, First, Middle Initial) California Pacific	Transaction ID: D2883 Date of Disbursement
Mailing Address 210 East Bonita Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
<div> <div>City San Dimas State CA Zip Code 91773</div> <div> <div>Purpose of Disbursement Transportation</div> <div>Candidate Name</div> </div> <div> <div>Category/Type</div> </div> </div>	Amount of Each Disbursement this Period <div>263.20</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div>	

SUBTOTAL of Disbursements This Page (optional)

632.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) California Pacific Mailing Address 210 East Bonita Ave.	Transaction ID: D2879 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City San Dimas State CA Zip Code 91773 Purpose of Disbursement Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>119.35</div>
B. Full Name (Last, First, Middle Initial) California Pacific Mailing Address 210 East Bonita Ave.	Transaction ID: D2881 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City San Dimas State CA Zip Code 91773 Purpose of Disbursement Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>184.85</div>
C. Full Name (Last, First, Middle Initial) California Pacific Mailing Address 210 East Bonita Ave.	Transaction ID: D2880 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City San Dimas State CA Zip Code 91773 Purpose of Disbursement Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>119.35</div>

SUBTOTAL of Disbursements This Page (optional)

423.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Douglas Boxer & Associates

Mailing Address 854 Longridge Road

City Oakland State CA Zip Code 94610

Purpose of Disbursement
PAC Political Consulting Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2891

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address P.O. Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
PAC Shipping/Postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2893

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Get Active Software, Inc.

Mailing Address 2855 Telegraph Avenue, Suite 600

City Berkeley State CA Zip Code 94705

Purpose of Disbursement
PAC Website Maintenance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2896

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

7656.69

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Kaufman Downing LLP	Transaction ID: D2900 Date of Disbursement
Mailing Address 777 S. Figueroa Street, Suite 4050	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Los Angeles State CA Zip Code 90017-5864	Amount of Each Disbursement this Period
Purpose of Disbursement Legal & Treasury Fees	<div>1053.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kaufman Downing LLP	Transaction ID: D2901 Date of Disbursement
Mailing Address 777 S. Figueroa Street, Suite 4050	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Los Angeles State CA Zip Code 90017-5864	Amount of Each Disbursement this Period
Purpose of Disbursement Legal & Treasury Expenses	<div>7.19</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Gloria Littman	Transaction ID: D2897 Date of Disbursement
Mailing Address 109 Croyden Ct.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 2 / 2 0 0 8</div> </div>
City Albertson State NY Zip Code 11507-2207	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Accounting Services	<div>700.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1760.19

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Progressive Strategy Partners LLC

Mailing Address 5015 Eagle Rock Blvd., Suite 100

City Los Angeles State CA Zip Code 90041

Purpose of Disbursement
PAC Political Consulting Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2946

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2426.00

B.

Full Name (Last, First, Middle Initial)
Progressive Strategy Partners LLC

Mailing Address 5015 Eagle Rock Blvd., Suite 100

City Los Angeles State CA Zip Code 90041

Purpose of Disbursement
PAC Political Consulting Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2920

Date of Disbursement

/ /

Amount of Each Disbursement this Period

348.00

C.

Full Name (Last, First, Middle Initial)
Transfirst LLC

Mailing Address 5950 Berkshire Lane, Suite 1100

City Dallas State TX Zip Code 75225

Purpose of Disbursement
PAC Bank Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2929

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.00

SUBTOTAL of Disbursements This Page (optional)

2809.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 2167	Transaction ID: D2941 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 6 / 2 0 0 8</div> </div>
City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>12.01</div>
B. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2942 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 6 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>137.65</div>
C. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1100 City Albany State NY Zip Code 22500 Purpose of Disbursement Telephone Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2939 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 2 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>37.42</div>

SUBTOTAL of Disbursements This Page (optional)

187.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 1100

City Albany State NY Zip Code 22500

Purpose of Disbursement
Telephone Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2935

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.68

B.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 1100

City Albany State NY Zip Code 22500

Purpose of Disbursement
Internet Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2940

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.95

C.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 1100

City Albany State NY Zip Code 22500

Purpose of Disbursement
Telephone Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2938

Date of Disbursement

/ /

Amount of Each Disbursement this Period

8.16

SUBTOTAL of Disbursements This Page (optional)

22.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 1100

City Albany State NY Zip Code 22500

Purpose of Disbursement
Telephone Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2937

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

37.42

B.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 1100

City Albany State NY Zip Code 22500

Purpose of Disbursement
Telephone Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2936

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

33.72

C.

Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 S. Hope Street, Ste. 100

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Credit Card Payment-Memo Item. Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2875

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)

101.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 S. Hope Street, Ste. 100

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Bank Charges
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2873
Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 S. Hope Street, Ste. 100

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Credit Card Payment-Itemization Below
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2876
Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

C.

Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 S. Hope Street, Ste. 100

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Bank Charges
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2878
Date of Disbursement

/ /

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 S. Hope Street, Ste. 100

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Credit Card Payment-Itemization Below
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2877
Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

2912.05

B.

Full Name (Last, First, Middle Initial)
Amazon.com

Mailing Address P.O. Box 81226

City Seattle State WA Zip Code 98181

Purpose of Disbursement
PAC Office Expenses
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2838
Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

341.36

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 S. Hope Street, Ste. 100

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement
Bank Charges
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2874
Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2912.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Loews Regency Hotel

Mailing Address 540 Park Ave.

City State Zip Code
New York NY 10065

Purpose of Disbursement
PAC Hotel Accommodations

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2902

Date of Disbursement

/ /

Amount of Each Disbursement this Period

589.28

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Marriott

Mailing Address 1701 California Street

City State Zip Code
Denver CO 80202

Purpose of Disbursement
PAC Convention Hotel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2904

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1719.30

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Discover Card

Mailing Address PO Box 15251

City State Zip Code
Wilmington DE 19886-5251

Purpose of Disbursement
Credit Card Payment-Memo Item. Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2890

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1706.65

SUBTOTAL of Disbursements This Page (optional)

1706.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) Delta Air Mailing Address P.O. Box 20706	Transaction ID: D2887 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30320-6001 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>377.00</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Sheraton Denver Mailing Address 1550 Court Place City Denver State CO Zip Code 80202 Purpose of Disbursement PAC Hotel Accomodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2922 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1216.79</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Nordstrom Bank Mailing Address PO Box 79137 City Phoenix State AZ Zip Code 85062-9137 Purpose of Disbursement Annual Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2908 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>595.00</div>

SUBTOTAL of Disbursements This Page (optional) ►

595.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Expedia Travel

Mailing Address 3150 139th Avenue SE

City Bellevue State WA Zip Code 98005

Purpose of Disbursement
PAC Travel Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2892

Date of Disbursement

/ /

Amount of Each Disbursement this Period

515.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address PO Box 77920

City Washington State DC Zip Code 20013-8320

Purpose of Disbursement
Credit Card Payment-Memo Item. Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2931

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address PO Box 77920

City Washington State DC Zip Code 20013-8320

Purpose of Disbursement
Credit Card Payment-Memo Item. Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2932

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3812.05

SUBTOTAL of Disbursements This Page (optional)

3832.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)
Hertz Rent-A-Car

Mailing Address 500 E. Anaheim St.

City Long Beach State CA Zip Code 90813

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2898

Date of Disbursement

09 / 26 / 2008

Amount of Each Disbursement this Period

1638.13

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Sheraton Denver

Mailing Address 1550 Court Place

City Denver State CO Zip Code 80202

Purpose of Disbursement
PAC Hotel Accomodations

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2923

Date of Disbursement

09 / 26 / 2008

Amount of Each Disbursement this Period

1315.20

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address P.O. Box 36647 1 CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Airfare

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2925

Date of Disbursement

09 / 26 / 2008

Amount of Each Disbursement this Period

600.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A.

Full Name (Last, First, Middle Initial)

Whole Foods Market

Mailing Address 1440 P Street NW

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
PAC Office Expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2944

Date of Disbursement

/ /

Amount of Each Disbursement this Period

71.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Visa

Mailing Address PO Box 77920

City
Washington

State
DC

Zip Code
20013-8320

Purpose of Disbursement
Credit Card Payment-Memo Item. Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2933

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1358.25

C.

Full Name (Last, First, Middle Initial)

Sheraton Denver

Mailing Address 1550 Court Place

City
Denver

State
CO

Zip Code
80202

Purpose of Disbursement
PAC Hotel Accommodations

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2921

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1278.25

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1358.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial) VISA	Transaction ID: D2943 Date of Disbursement																				
Mailing Address Post Office Box 5930	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	6		2	0	0	8												
City State Zip Code Carol Stream IL 60197 Purpose of Disbursement Credit Card Payment-Memo Item. Below Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1433.32</td> </tr> </table>	1433.32																			
1433.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Sheraton Denver	Transaction ID: D2924 Date of Disbursement																				
Mailing Address 1550 Court Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	6		2	0	0	8												
City State Zip Code Denver CO 80202 Purpose of Disbursement PAC Hotel Accomodations Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1322.73</td> </tr> </table>	1322.73																			
1322.73																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type [MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Whole Foods Market	Transaction ID: D2945 Date of Disbursement																				
Mailing Address 1440 P Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	6		2	0	0	8												
City State Zip Code Washington DC 20005 Purpose of Disbursement PAC Office Expenses Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>48.59</td> </tr> </table>	48.59																			
48.59																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type [MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

1433.32

TOTAL This Period (last page this line number only)

29647.98

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 47

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
PAC For a Change

A. Full Name (Last, First, Middle Initial)
Andrew Rice for US Senate, Inc.

Mailing Address PO Box 1027

City Oklahoma City State OK Zip Code 73102

Purpose of Disbursement
Contribution

Candidate Name
Andrew Rice

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OK District:

Transaction ID: D2846

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4000.00

B. Full Name (Last, First, Middle Initial)
Brown for Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Contribution

Candidate Name
Charlie Brown

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 04

Transaction ID: D2871

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Julie Bornstein for Congress

Mailing Address 73-280 Highway 111, Suite 207

City Palm Desert State CA Zip Code 92260

Purpose of Disbursement
Contribution

Candidate Name
Julie Bornstein

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 45

Transaction ID: D2899

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

14000.00

TOTAL This Period (last page this line number only)

14000.00